IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5   Applicants: Min-Jer Lin

App. No.: 10/710,399   Filing Date: 07/08/2004

Examiner: DAO H, NGUYEN   Art Unit: 2818

Docket No.:   LKSP0027USA

10   Title: SEMICONDUCTOR   PACKAGE   AND   METHOD   FOR
MANUFACTURING THE SAME

To: Mail Stop 16
Commissioner for Patents
15   P.O. Box 1450
Alexandria VA 22313-1450

Subject: Request for a refund of incorrect deduction
for claims in excess of twenty pursuant to 37 CFR
20   1.26

Dear Sir,

    The applicant filed a response to the Office action mailed
25   on 12/14/2006 of the above-identified application on
03/14/2007. There is no excess claim fee that needed to be
deducted.

    But the fee $150 for excess claims fee was charged from
the deposit account 50-3105 on 03/15/2007.

30

03/15 2	10710399	LKSP0027USA	1202	$150.00

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Document code: WFEE
                    United States Patent and Trademark Office
                    Sales Receipt for Accounting Date:  03/15/2007

DJACOBS      SALE  #00000002    Mailroom Dt:  03/13/2007    503105    10710399
                   01    FC : 1202              150.00 DA
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The Fee Worksheet dated 03/16/2007 on IFW shows that total

claims are 23 and highest number previously paid for is 20

5   (Attachment 1). However, the Fee Worksheet dated 07/08/2004

on IFW shows that total claims are 25 (Attachment 2). So the

excess claims fee should not be charged.

Please refund the fee $150 to the deposit account 50-3105

10   pursuant to 37 CFR 1.26. Your quick response is greatly

appreciated.

Sincerely yours,

15   _Winston Hsu_____   Date: ___04/16/2007___

Winston Hsu, Patent Agent No. 41,526

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

Facsimile: 806-498-6673

20   e-mail: winstonhsu@naipo.com

Note: Please leave a message in my voice mail if you need to

talk to me. (The time in D.C. is 12 hours behind the Taiwan

time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)

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Attachment 1

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875	Application or Docket Number 10710399	Filing Date: 07/08/2004	☒ To be Mailed

APPLICATION AS FILED – PART I

SMALL ENTITY ☐ OR OTHER THAN SMALL ENTITY

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	RATE ($)	FEE ($)		RATE ($)	FEE ($)
☐ BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A	N/A			N/A	
☐ SEARCH FEE (37 CFR 1.16(k), (i), or (m))	N/A	N/A	N/A			N/A	
☐ EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))	N/A	N/A	N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(i))	minus 20 =	*	X $25 =		OR	X $50 =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X $100 =			X $200 =	
☐ APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
☐ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))			+ $180			+$360	
			TOTAL			TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED – PART II

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

AMENDMENT A   100306

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE ($)	ADDITIONAL FEE ($)		RATE ($)	ADDITIONAL FEE ($)
Total (37 CFR 1.16(i))	* 12	Minus	** 20	= 0	X $25 =		OR	X $50=	
Independent (37 CFR 1.16(h))	* 1	Minus	*** 3	= 0	X $100 =		OR	X $200=	0
☐ Application Size Fee (37 CFR 1.16(s))									
☐ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B   3/13/07

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE ($)	ADDITIONAL FEE ($)		RATE ($)	ADDITIONAL FEE ($)
Total (37 CFR 1.16(i))	* 23	Minus	** 20	= 3	X $25 =		OR	X $50 =	150.00
Independent (37 CFR 1.16(h))	*	Minus	** 3	=	X $100 =		OR	X $200 =	
☐ Application Size Fee (37 CFR 1.16(s))									
☐ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							OR		
CALCULATE					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	150.00

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Legal Instrument Examiner:
peggy s. yarborough

Attachment 2	**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	SEMICONDUCTOR PACKAGE AND METHOD FOR MANUFACTURING THE SAME

Application Number :

Date :

First Named Applicant: Min-Jer Lin

Attorney Docket Number: LKSP0027USA

TOTAL FEE AUTHORIZED $ 900

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

BASIC FILING FEE

Fee Description	Fee Code	Amount $	Fee Paid $
Utility Filing Fee	1001	770	770
		Subtotal For Basic Filing Fees: $ 770	

EXTRA CLAIM FEES

Fee Description	Extra Claim	Fee Code	Amount $	Fee Paid $
Total Claims : 25	5	1202	18	90
Independent Claims : 2	0	1201	86	0
			Subtotal For Extra Claims Fees: $ 90	

ASSIGNMENT FEES

Fee Description	Property Number	Quantity	Fee Code	Amount $	Fee Paid $
Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40
				Subtotal For Additional Fees: $40	

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 503105

Access Code ****

Deposit name: North America Intellectual Property Corporation

Deposit authorized name: WINSTON HSU

Signature: VAEB-JMXX-8IIL